SEP 2 2 2005

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DATE: September 22, 2005

RE: Serial N

Serial No. 10/072,475; Filed:

February 6, 2002; For: Handpiece for Treatment of Tissue; Applicants: Roger Stern

et al.; Conf. No. 3000

TO: Examiner Michael Peffley

Art Unit 3739

FROM: Kevin G. Rooney

FAX NO.: 571-273-8300

TOTAL PAGES: 27 (including cover sheet)

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MESSAGE/COMMENTS

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PLEASE DELIVER TO EXAMINER PEFFLEY IMMEDIATELY

Enclosures: Amendment Transmittal including Petition for Extension of Time and

authorization to charge deposit account extension fee

Amendment under 37 C.F.R. § 1.116 (22 pgs.)

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I hereby certify that this correspondence is being correspondence is being transmitted via facsimile to Examiner Michael Peffley in Group Art)Unit 3739 (Fax 2-273-8300) on September 22, 2005

Applicants:

Roger Stern et al.

Serial No.:

10/072,475

Filed:

February 6, 2002

Group Art Unit:

3739

Examiner:

Michael Peffley

Title:

HANDPIECE FOR TREATMENT OF TISSUE

Confirmation No.:

3000

Atty Docket:

THERM-11

Cincinnati, Ohio 45202

September 22, 2005

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

- Transmitted herewith is an amendment for this application. 1.
- 2. X Small Entity status is claimed.

Other than a Small Entity.

The fee has been calculated as shown below: 3.

09/23/2005 CNGUYEN 00000066 233000 10072475

01 FC:2251

60.00 DA

(Col. 1)		(Col. 2)		(Col. 3)	SMALL ENTITY		LARGE ENTITY	
Claims Remaining After Amendment		Highest No. Previously Paid For		Extra	Present Rate	Fee	Present Rate	Fee
TOTAL	61	MINUS	102	_ 0	105			
INDED	†		102	= 0	x \$25	\$0	x \$50	\$0
INDEP.	21	MINUS	31	= 0	x \$100	\$0	x \$200	\$O
FIRST PF	ESENTATIO	N OF MULT	IDI E DED			X 4200	\$0	
		TO MOLI	II LE DEP.	+\$180	\$0	+\$360	\$0	
		TOTALS		TOTAL FEE	\$	TOTAL FEE	\$0	

- If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- ☆☆☆ If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid for" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

- X No additional fee for claims is required.
- 4. Attached is a check in the sum of _\$___.
 - Please charge my Deposit Account No. 23-3000 in the amount of A duplicate copy of this sheet is attached.
- 5. The proceedings herein are for a patent application and the provisions of 37

Complete (a) or (b) as applicable.

(a) _X_ Applicant petitions for an extension of time under 37 CFR 1.136 for the total number of months checked below:

				F	ee for						
			Extension	0	ther than	Fee for					
			(months)	SI	<u>nall entity</u>	small entity					
		<u>X</u>	one month		120.00	\$ 60.00					
			two months	\$	450.00	\$225.00					
			three months		1,020.00	\$510.00					
			four months	\$	1,590.00	\$795.00					
		A 44									
	Attached is a check in the amount of for the three month extension fee as required by 37 C.F.R. § 1.17(c)										
	X	X Please charge my Denocit Account No. 20 2000									
		X Please charge my Deposit Account No. 23-3000 in the amount of \$60.00 for one month extension fee.									
		(Chec	k and complete t	he	next item, if	applicable)					
An extension for months has already been secured and the fee paid thereof of \$ is deducted from the total fee due for the total months of extension now requested. Extension fee due with this request \$											
OR											
(b)		Applicant believes that no extension of time is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.									
XX	If any Accou	additio nt No.	nal fee for claims 23-3000. A dup	s or olic	extension o ate of this tra	f time is required, charge ansmittal is attached.					

Respectfully submitted,

WOOD HERRON & EVANS, L.L.I

Kevin G. Rooney

Reg. No. 36,330

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